

SAMRC BOARD MEMBER ANNUAL DECLARATION OF INTERESTS

Title (Mr/Ms/Professor/Doctor)	Professor
Name & Surname	Bonga Chiliza
Name of Primary Employer or Self-Employed	University of KwaZulu-Natal
Position Held	Head of Department of Psychiatry


I hereby certify that the following information is complete and correct to the best of my knowledge and I hereby declare to have the following interests:

Please provide details of any potential conflicts of interests arising out of the following:

(1) Board Directorships <i>(Please provide the full name of the organisation/institution/entity)</i>	
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(2) Research Funding <i>(funding you/ your Institution/Organisation is receiving from the SAMRC)</i>	
<p>Title: Psychosis Mapping in Kwazulu-Natal</p> <p>Major Goals: This grant will generate data to improve the understanding of psychosis within a sub-Saharan African setting. It will address the incidence rates, clinical presentation, and associated risk factors of psychosis as well as the impact of the social, economic and physical environment on these factors in this setting</p> <p>Project Number: MR/SO08179/1</p> <p>Name of PD/PI: Profs B Chiliza & Jonathan Burns</p> <p>Source of Support: South African Medical Research Council/ UK MRC</p>	
(3) Shareholding/Financial Interests	
<p>Only declare interests in companies that provide goods or services to the SAMRC</p>	

None.

(4) Major academic collaborators <i>[national and international]</i> Please declare all significant collaborations outside your primary institution or organisation
Prof Jonathan Burns – University of Exeter, UK Prof David Henderson – Boston University, USA Prof Lauren Ng – UCLA, USA
(5) Interests of Close Family Members: Please provide the full name and relationship (spouse/partner/son/daughter etc.) of immediate family members associated with or employed by an institution/organisation/company that receives funding from the SAMRC or provides goods and services to the SAMRC.
None.
(6) Sponsorships, Gifts and Hospitality from a source other than a family member Please include name of entity, description of gift/sponsorship and value
None.
(7) Any other interests you wish to declare:
None.

Signature: 

Date: 11 November 2025